Case 16-271	.28 Doc 1	Filed 08/24/16		3/24/16 09:00:59	Desc Main
Fill in this information to ident	ify your case:	Document	Page 1 of 5		ED
United States Bankruptcy Court	for the	taran inggan karawa aka Ciga ja ja ja kakarawa		UNITED STATES BAI NORTHERN DISTR	NKRHPTCY COURT
Northern District of Illinois			Topopour Amount		
Company of Contract			00 a a a a a a a a a a a a a a a a a a	AUG 24	± 2010
Case number (If known):	A-4-50-14-14	Chapter you are filing Chapter 7	g under:		>==
		Chapter 11	нителения	JEFFREY P. ALLS	STEADT, CLERK
		☐ Chapter 12 ☐ Chapter 13			Check if this is an
					amended filing
Official Form 101					
Voluntary Peti	ition for	' Individual	ls Filing	, for Bankr	uptcy 12/15
The bankruptcy forms use you a joint case—and in joint cases, the	ina <i>Deblor i</i> lo re lese forms use <i>vi</i>	ner to a deptor ming aid	me. A married co	ouple may file a bankrupi	tcy case together—called a
the answer would be yes if eithe	r debtor owns a c	ou to ask for information is car. When information is	n from both debt s needed ahout t	ors, nor example, it a for he englises senarately t	m asks, "Do you own a car,"
Debtor 2 to distinguish between	them. In joint cas	ses, one of the spouses	must report info	ormation as <i>Debtor 1</i> and	the other as <i>Debtor 1</i> and
same person must be Debtor 1 ii	n all of the forms.		•	· · · · · · · · · · · · · · · · · · ·	
Be as complete and accurate as	possible. If two n	narried people are filing	រូ together, both ខ	re equally responsible for	or supplying correct
information. If more space is nee	eded, attach a sei	parate sheet to this forn	n. On the top of a	nny additional pages, wri	te your name and case numbe
(if known). Answer every question	on.				
Part 1: Identify Yourself					
	About Debtor				
Your full name	About Deptor	Harris of the National Activities		About Debtor 2 (Spou	se Only in a Joint Case):
Write the name that is on your			7.5		
government-issued picture	Ariel First name				
identification (for example, your driver's license or	Bene			First name	
passport).	Middle name			Middle name	
Bring your picture	Little	***************************************	····		
identification to your meeting with the trustee.	Last name			Last name	
The troubles.	Suffix (Sr., Jr., II, I	II)		Suffix (Sr., Jr., II, III)	
			÷	A.	
2. All other names you have used in the last 8	None		·	<u></u>	
years	First name			First name	
Include your married or	Middle name		 :	Middle name	· · · · · · · · · · · · · · · · · · ·
maiden names.	Last name			Last name	
	Last harre			: Last flame	
	First name		·	First name	

	Middle name		4.	Middle name	
	Last name	····		Last name	•
			N		
			anternational contraction and production are areas		
3. Only the last 4 digits of		0 0 1 -			
your Social Security	xxx - xx -	<u>8 8 1 9</u>	stantes-	xxx - xx	
number or federal	OR		ļ.	OR	
Individual Taxpayer Identification number	9 xx - xx -		_	9 xx - xx	
(ITIN)	-		_		

Document

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Page 2 of 54

Debtor 1

Ariel First Name В

Middle Name

Little Last Name

Case number (if known)_

000000			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in		☑ I have not used any business names or EfNs.	☐ I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and		
	doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		4532 South Drexel Blvd	
		Number Street	Number Street
		Apt 203	
		Chicago IL 60653	
		City State ZIP Code	City State ZIP Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		none	<u> </u>
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
enements.	STATE CONTROL OF A		No.

Document

Page 3 of 54

Debtor 1

Little

Last Name

Case number (if known)_

9	a	r	t	2	Н

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you	Check for Ban	one. (For kruptcy (F	a brief description of each, see <i>No</i> Form 2010)). Also, go to the top of p	tice Required by 1 page 1 and check	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
	are choosing to file under		apter 7		-	
		Ch:	apter 11			
		☐ Cha	apter 12			
v:			pter 13			
vavanou/9392v	૧૧૧૯૧૬ મહારાજન ભાગભાગ ૧૯૧૧ છે. ૧૯૧૧ છે. ૧૯૧૧ માટે કરાઈ લાગ ૧૯૧૧ ૧૯૧૧ માટે જ ૧૬ ૧૯૧૧ માટે મહારાજન ૧૯૧૧ વર્ષો સ્ ૧૯૧૧ માટે કર્યા માટે કરાઈ છે. ૧૯૧૧ માટે કરાઈ લાગ ૧૯૧૧ માટે કરાઈ લાગ ૧૯૧૧ માટે મહારાજન ૧૯૧૧ માટે કરાઈ છે. ૧૯૧૧ મ	eng sang pagasinahasaninah Collabora (Pen	######################################	TBARKUMENDETSE ZIM AND MICHAEL STEEL STEEL STEEL AND STEEL AND STEEL STEEL STEEL STEEL STEEL STEEL STEEL STEEL		
8.	How you will pay the fee	you sub	n court to rself, you mitting y	te entire fee when I file my per for more details about how you in u may pay with cash, cashier's your payment on your behalf, your trinted address.	ກay pay. Typica check, or monev	order. If your attorney is
		☐ I ne App	ed to pa lication i	ay the fee in installments. If yo for Individuals to Pay The Filing	ou choose this op Fee in Installme	otion, sign and attach the ents (Official Form 103A).
		Z I red	nuet th	at my fae ha waiyad (Vay ma	requires this such	
		Byl	aw, a jud	dge may, but is not required to,	waive your fee,	tion only if you are filing for Chapter 7. and may do so only if your income is
		less	than 15	0% of the official poverty line th	at applies to you	ir family size and you are unable to
		Cha Cha	pter 7 Fi	in installments), if you choose the illing Fee Walved (Official Form	าเร option, you m 103B) and file it	nust fill out the Application to Have the with your petition.
·/	galan dipangan dipinggalan dan dalah kanaman gapagan kalanda kalanda mengangan 18 dahah Andah kalanda mengangan dalah	Maria I de la composito de la		and a superposition of the sup	THE WILLIAM TO THE PROPERTY OF	
9.	Have you filed for bankruptcy within the	☑ No				
	last 8 years?	☐ Yes.	District	When	MM / DD / YYYY	Case number
			District		MM / DD / YYYY	Case wimber
				VVIIGI	MM / DD / YYYY	Case number
			District .	When	MM / DD / YYYY	Case number
	and magnetic and the contract of the special contract of the c				WINT DOTTIN	
10.	Are any bankruptcy	☑ No				
	cases pending or being filed by a spouse who is	Yes.	Debtor			Relationship to you
	not filing this case with you, or by a business		District _	When		Case number, if known
	partner, or by an affiliate?				MM / DD / YYYY	
			Debtor _			Relationship to you
			District _	When	MM / DD / YYYY	Case number, if known
	ANNUAL CONTRACTOR OF THE PROPERTY OF THE PROPE			141 (A) 1 mm lum man (Jury J. 1971 (1974) A) 14 Accident A 1 mm manual of J. 1971 (1974) A) 1 mm manual many 1574 (1974) A) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THE WASHINGTON TO THE PARTY OF	Will be did. All defeats have the opposite open per
	Do you rent your residence?	☑ No.	Go to line			
	residence?	☐ Yes.	Has your residenc	r landlord obtained an eviction judgr e?	ment against you a	and do you want to stay in your
			No. 0	Go to line 12.		
				pankruptcy petition.		Against You (Form 101A) and file it with

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Page 4 of 54 Document

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Ariel

В

Little

Debtor 1 AIICI First Name Middle N	D LITTIE Jame Last Name	Case number (if known)
Part 3: Report About Any	.	
Report About Any	Businesses You Own as a	Sole Proprietor
12. Are you a sole proprietor	r D	
of any full- or part-time	The section are in	
business? A sole proprietorship is a business you operate as an	Yes. Name and location of	business
individual, and is not a	Name of business, if any	/
separate legal entity such as a corporation, partnership, or		
LLC.	Number Street	
If you have more than one sole proprietorship, use a		
separate sheet and attach it		
to this petition.	City	State ZIP Code
	Check the appropriate	e box to describe your business:
	Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
	Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
	☐ Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
	Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
1	None of the above	;
Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	any of these documents do not ☑ No. I am not filing under C ☐ No. I am filing under Chap the Bankruptcy Code.	ter 11 and I am a small business debtor according to the definition in the
Part 4: Report if You Own	or Have Any Hazardous Pro	perty or Any Property That Needs Immediate Attention
4 Do year own as here		
4. Do you own or have any property that poses or is	☑ No	
alleged to pose a threat of imminent and	Yes. What is the hazard?	
identifiable hazard to		
public health or safety?		
Or do you own any property that needs		
immediate attention?	If immediate attention	n is needed, why is it needed?
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		
	Where is the property	?
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Number Street
		City State ZIP Code

Document

Page 5 of 54

Debtor 1

Little

Case number (if known)_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing abo	ut
credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

☐ Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing a	bout
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-27128 Doc 1 Filed 08/24/16

Document

Entered 08/24/16 09:00:59 Desc Main Page 6 of 54

Debto	

				•	
Debtor 1	Ariel First Name	B Middle Name	Little Last Name		Case number (# known)

P	art 6: Answer These Que	estions for Reporting Purposes	•					
16	. What kind of debts do you have?	16a. Are your debts primarily as "incurred by an individual p	/ consumer debts? Cor primarily for a personal, far	nsumer debts are nily, or household	defined in 11 U.S.C. § 101(8) purpose."			
	,	☐ No. Go to line 16b. ☐ Yes. Go to line 17.						
		16b. Are your debts primarily money for a business or inves	business debts? Businestment or through the open	ness debts are de ation of the busine	bts that you incurred to obtain			
		No. Go to line 16c. Yes. Go to line 17.						
		16c. State the type of debts you ov	we that are not consumer o	lebts or business (debts.			
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Chap	ter 7. Go to line 18.	commence (exercise the place) and resembly the commence of the	Andreas and the second of the control of the contro			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expenses a	7. Do you estimate that afte are paid that funds will be a	er any exempt pro vailable to distribu	perty is excluded and the to unsecured creditors?			
18.	How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000			
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 mill \$50,000,001-\$100 mill \$100,000,001-\$500 nill	ion [\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
	How much do you estimate your liabilities to be?	■ \$0-\$50,000 ■ \$50,001-\$100,000 ■ \$100,001-\$500,000 ■ \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 mi \$100,000,001-\$500 m	ion [\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
Pa	1177: Sign Below							
Fo	ryou	I have examined this petition, and I correct.						
		If I have chosen to file under Chapte of title 11, United States Code. I und under Chapter 7.	er 7, I am aware that I may derstand the relief available	proceed, if eligible under each chap	e, under Chapter 7, 11,12, or 13 ter, and I choose to proceed			
		If no attorney represents me and I d this document, I have obtained and	id not pay or agree to pay read the notice required by	someone who is n / 11 U.S.C. § 342(ot an attorney to help me fill out b).			
		I request relief in accordance with th	ne chapter of title 11, United	d States Code, spe	ecified in this petition.			
		I understand making a false stateme with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 3519, and 3	fines up to \$250,000, or in	obtaining money prisonment for up	or property by fraud in connection to 20 years, or both.			
		Signature of Debtor 1	bt x	Signature of Deb	tor 2			
,		Executed on DS 33 3	016	Executed on	/ DD / / / / / / / / / / / / / / / / /			

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 7 of 54

Document Page 7 of 54

Debtor 1 Ariel B Little Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

consequences?
O No
2 Yes
are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are naccurate or incomplete, you could be fined or imprisoned? No Yes
olid you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? No
1 Yes. Name of Person_Veronica Eason
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

	up Kille x		
Signature of [Signature of Del	otor 2
Date	08232016	Date	MM / DD /YYYY
Contact phone		Contact phone	
Cell phone	(773) 964-9415	Cell phone	
Email address	melizjae1984@gmail.com	Email address	

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 8 of 54 Fill in this information to identify your case: Ariel Debtor 1 В. Little First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois **S** (If known) ☐ Check if this is an amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? Yes. Name of person Veroncia Eason . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2

MM / DD / YYYY

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 9 of 54

and the state of	information t	Oldentry	your case.		
Debtor 1	Ariel	В	Littl	е	
	First Name		Middle Name	Last Name	
Debtor 2					
(Spouse, if filing	g) First Name		Middle Name	Last Name	
United States	s Bankruptcy Co	ourt for the:	Northern District of I	Ilinois	
Case number	r				
	(If known)		***************************************		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 200.00
1c. Copy line 63, Total of all property on Schedule A/B	\$200.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$29,486.00
Your total liabilities	\$29,486.00
Part 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,748.00
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$1,650.00

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 10 of 54

Debtor 1

Ariel B Little Page 10 of 54

First Name Middle Name Last Name Case number (if known)

	an 4.2 Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	☐ No. You have nothing to report on this part of the form. Check this box and submit this form. Yes	orm to the court with your other	schedules.
7.	What kind of debt do you have?	deliminate antique en monte en	estrad var esta commenza titista val titi salt sitt til radionire eta este este este tratación por titista i meste
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpo	individual primarily for a perso ses. 28 U.S.C. § 159.	nal,
	Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	t of the form. Check this box an	d submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	\$1,844.00
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	NOTE WITE CONTROL AND	тем не при
	From Part 4 on Schedule E/F, copy the following:	Total claim	
	9a. Domestic support obligations (Copy line 6a.)	\$	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line 6f.)	\$0.00	
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00	
	9g. Total. Add lines 9a through 9f.	\$0.00	
			J

Fill in this	information	to identif	y your case and this	filing:	<u>raye</u>
Debtor 1	Ariel	В	Littl	e	
	First Name		Middle Name	Last Name	
Debtor 2					
(Spouse, if filing	ng) First Name		Middle Name	Last Name	
United State	s Bankruptcy	Court for the	Northern District of II	llinois	
Case numbe	эг				

	······				

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

es. Where is the property?					
Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secure the amount of any se Creditors Who Have	cured (Claims	claims on Schedu	ile D. perty.
	Manufactured or mobile home	entire property?	. 1	portion you ow	vn?
	Land	\$0.0	00	\$0	0.00
City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the natu interest (such as the entireties, or a	fee si	imple, tenancy	bν
	Who has an interest in the property? Check one.		i iii c	estate), ii kilow	/11.
	Debtor 1 only				
County	Debtor 2 only				
	Debtor 1 and Debtor 2 only	Check if this is		munity proper	ty
		(see instruction	m ì		
	At least one of the debtors and another	•	5)		
	☐ At least one of the debtors and another Other information you wish to add about this it property identification number:	em, such as local	») —		
own or have more than one, list here:	Other information you wish to add about this it property identification number:	em, such as local			44 1 0 41
own or have more than one, list here:	Other information you wish to add about this it property identification number: What is the property? Check all that apply.	em, such as local Do not deduct secured	 d claim		
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		Manufactured or mobile home	entire pro	perty?	portion yo	ou own?
		☐ Land	\$	0.00	\$	0.0
		☐ Investment property	Ph. 11 /		_	
	City State ZIP Code	☐ Timeshare ☐ Other	interest (s	uch as fee	of your own simple, ten e estate), if	ancy by
		Who has an interest in the property? Check one.				
	County	Debtor 1 only				
	County	Debtor 2 only	_			
		Debtor 1 and Debtor 2 only			mmunity p	roperty
		At least one of the debtors and another	(see ins	structions)		
		Other information you wish to add about this ite property identification number:	em, such as l	ocal		
ld th	e dollar value of the nortion you own for all	l of your entries from Part 1, including any entries		ſ		
u ha	ave attached for Part 1. Write that number h	nere	s for pages	→	\$	0.0
оп ол	Describe Your Vehicles wn, lease, or have legal or equitable interes hat someone else drives. If you lease a vehicle	ot in any vehicles, whether they are registered or report it on Schedule G: Executory Contracts a	not? Include a and Unexpired	any vehicles d Leases.		
wn th irs, l	vn, lease, or have legal or equitable interes	e, also report it on Schedule G: Executory Contracts a	not? Include a and Unexpired	any vehicles d Leases.		
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you have attached for Part 2. Write that number here

Debtor 1

Describe Your Personal and Household Items

9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No	o you own or have any le	gal or equitable interest in any of the following items?	portion yo Do not dedu	ct secured claims
Examples: Major appliances, furniture, linens, china, kitcherware No No Yes, Describe	Household goods and	iurnishings	Seasor exemption	ns. and Adding this end
Household Furniture S S S S S S S S S		ces, furniture, linens, china, kitchenware		
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cances and kayaks; carpentry tools; musical instruments 10. Prearms 10. Prearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver 13. Non-farm animals Examples: Dogs, cats, birds, horses 14. No 15. Yes, Describe		Household Furniture	\$	0.00
Z No Yes. Describe	Electronics			
Scotlectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes, Describe	conections; e	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ectronic devices including cell phones, cameras, media players, games		
8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe			· · · · · · · · · · · · · · · · · · ·	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	Tes. Describe		\$	0.00
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe	Collectibles of value			
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Yes. Describe	and kayaks; c	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes arpentry tools; musical instruments		
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe	r			
### 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No			\$	0.00
Yes. Describe	Examples: Pistols, rifles,	shotguns, ammunition, and related equipment	terretan kan isal	
### 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No			\$	0.00
No	Clothes			
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	□ No	es, furs, leather coats, designer wear, shoes, accessories		
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	Yes. Describe		\$	200.00
gold, silver No Yes. Describe	Jewelry			
Yes. Describe	gold, silver	ry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		:
Examples: Dogs, cats, birds, horses No Yes. Describe			\$	0.00
Yes. Describe		ls, horses	anna ann an ann ann ann ann ann ann ann	
4. Any other personal and household items you did not already list, including any health aids you did not list	☑ №			
	Yes. Describe		\$	0.00
i∕ No		ousehold items you did not already list, including any health aids you did not list	•	
Ves Cive enceifie	No		 i	
information	·		\$	0.00
5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	Add the dollar value of a	l of your entries from Part 3, including any entries for pages you have attached	\$	200.00

Debtor 1

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main First Name Middle Name Last Name Page 15 ofc 54 number (if known)

Part 4:	Describe	Your	Financial	Assets
r all the	Describe	Tour	rınancıaı	Assets

Oo you own or have an	y legal or equitable interest i	n any of the following?	portion yo	ct secured claim
6. Cash				
✓ No	i nave in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition	1	
		Cash:		
		Cash:	\$	0.00
7. Deposits of money Examples: Checking, and other	savings, or other financial acco	nunts; certificates of deposit; shares in credit unions, brokerage ho multiple accounts with the same institution, list each.	ouses,	
No No	ŕ	and a series and a		
☐ Yes		Institution name:		
	17.1. Checking account:		\$	0.00
	17.2. Checking account:			0.00
	17.3. Savings account:		\$	0.00
	17.4. Savings account:		\$	0.00
	17.5. Certificates of deposit:	4	\$	0.00
	17.6. Other financial account:		\$	
	17.7. Other financial account:			
	17.8. Other financial account:			
	17.9. Other financial account:			
	or publicly traded stocks investment accounts with brok Institution or issuer name:	erage firms, money market accounts		
	***************************************		<u> </u>	0.00
	E-MAN, 4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		\$	0.00
			<u> </u>	0.00
Non-publicly traded s an LLC, partnership, a	tock and interests in incorpo and joint venture Name of entity:	rated and unincorporated businesses, including an interest in % of ownership:	1	
		0% %	\$	0.00
Yes. Give specific information about			T	
Yes. Give specific information about them		0% _%	\$	0.00

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main First Name Middle Name Last Name Page 16 of 64 number (# known) Debtor 1

20.	Government and corn	Orate hands and oth	ner negotiable and non-negotiable instruments		
	Negotiable instruments	include personal che	cks, cashiers' checks, promissory notes, and money orders		
	Non-negotiable instrum	ents are those you ca	innot transfer to someone by signing or delivering them.		
	No No				
	Yes. Give specific information about	Issuer name:			
	them			\$	0.00
				\$	0.00
				\$	0.00
1.	Retirement or pension	accounts			
	Examples: Interests in II		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
	☑ No		-		
	Yes. List each account separately.	Type of account:	Institution name:		
		401(k) or similar plan:		\$	0.00
		Pension plan:		\$	0.00
		IRA:		\$	0.00
		Retirement account:		¢	0.00
		Keogh:		Ψ	0.00
		Additional account:		Ψ	0.00
		Additional account:		Þ	
	•	Additional account.		\$	0.00
Ŀ	Examples: Agreements voluments voluments voluments voluments voluments voluments	deposits you have ma vith landlords, prepaid	ade so that you may continue service or use from a company I rent, public utilities (electric, gas, water), telecommunications		
	2 No				
Ç	Yes	Inst	litution name or individual:		
		Electric:		\$	0.00
		Gas:		\$	0.00
		Heating oil:		\$	0.00
			al unit:	\$	0.00
		Prepaid rent:		\$	0.00
		Telephone:		\$	0.00
		Water:		\$	0.00
		Rented furniture:		\$	0.00
		Other:		\$	0.00
۸.					
	Inuities (A contract for a	a periodic payment of	money to you, either for life or for a number of years)		
-	Yes	Issuer name and descr			0.00
				\$	0.00
				\$ \$	0.00
				Ψ	

Debtor 1	De	btor	1
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Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main First Name Middle Name Last Name Page 17 ofc5-4 number (# Known)

24. Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529	count in a qualified ABLE program, or under a qualified state tuition program	m.	
☑ No	VACE		
Yes Institution	name and description. Separately file the records of any interests.11 U.S.C. § 52	24/ \	
modelis.	The time did description. Deparately like the records of any interests. IT 0.5.C. § 52	(1(c):	
0.00		\$	0.00
0.00		\$	0.00
ATTENDED TO THE OWNER OF THE OWNER OF THE OWNER		\$	0.00
25. Trusts, equitable or future interests in pexercisable for your benefit	property (other than anything listed in line 1), and rights or powers		
□ No			
Yes. Give specific		····	
information about them		\$	0.00
Last terminal transport and design and sent and			NAME OF THE PARTY
26. Patents, copyrights, trademarks, trade	secrets, and other intellectual property		
	tes, proceeds from royalties and licensing agreements		
☑ No		***************************************	
Yes. Give specific information about them			0.00
mormatori about tilem		\$	0.00
27. Licenses, franchises, and other general	Lintanaibles	acceptodally.	
Examples: Building permits, exclusive lice	nses, cooperative association holdings, liquor licenses, professional licenses		
☑ No			
Yes. Give specific			
information about them		\$	0.00
28. Tax refunds owed to you		portion Do not de	value of the you own? duct secured exemptions.
No No			
Yes. Give specific information	Federal:	\$	0.00
about them, including whether you already filed the returns	State:	\$ \$	0.00
and the tax years.		Ф	0.00
	Local:	a	
☑ No	spousal support, child support, maintenance, divorce settlement, property settlen	nent	
Yes. Give specific information	Alimony:	¢	0.00
	Maintenance:	\$ \$	0.00
	Support:	¢	0.00
	Divorce settlement:	φ	0.00
and the second s		¢	0.00
	Property settlement:	Ψ	
 Other amounts someone owes you Examples: Unpaid wages, disability insurar Social Security benefits; unpaid 	nce payments, disability benefits, sick pay, vacation pay, workers' compensation, loans you made to someone else		
☑ No			:
☐ Yes. Give specific information		***************************************	
		\$	0.00
L.			ļ.

Debtor 1	Ariel First Name	6-27128 B Middle Name	Doc 1 Filed 08/24/16 Little Document		
·		THE THE THE	Lost Name		
	s in Insurance				e en
Example	es: Health, disa	ibility, or life insu	rance; health savings account (H	ISA); credit, homeowner's, or renter's insura	nce
No No					
☐ Yes.	of each policy	rance company and list its value	Company name:	Beneficiary:	Surrender or refund valu
					\$
			Martin Commence of the Commenc		\$
					\$\$
If you are	erest in proper the beneficial because some	ry of a living trus	ou from someone who has died t, expect proceeds from a life inst	d urance policy, or are currently entitled to rec	reive
	Givo coocifia i	nformation	THE STATE OF THE S		AATTIMATURA AATTIMATURA AATTIMATURA AATTIMATURA AATTIMATURA AATTIMATURA AATTIMATURA AATTIMATURA AATTIMATURA AA
· 103,	Give specific if	momauon			0.0
Example	igainst third p s: Accidents, e	arties, whether mployment disp	or not you have filed a lawsuit utes, insurance claims, or rights t	or made a demand for payment o sue	
Yes.	Describe each	claim			ARREST OF THE STATE OF THE STAT
					\$
Other co to set of No	ntingent and u f claims	unliquidated cla	ilms of every nature, including	counterclaims of the debtor and rights	
Yes.	Describe each	claim	And the state of t		ONE OF THE PROPERTY OF THE PRO
					\$ 0.00
Any finar	ncial assets yo	ou did not alrea	dy list		
☑ No			And the second s		Action of the section
Yes.	Give specific in	formation			\$ 0.00
			Locale published and control or account of any and the second second second second second second second second		- Park
. Add the	dollar value of	fall of your enti	ies from Part 4, including any	entries for pages you have attached	
for Part 4	. Write that nu	umber here	***************************************		→ \$0.00
	and a family space to the same		and the second of the second o		
					Commence of the Commence of th
irt 5:	Describe A	ny Business	-Related Property You ()wn or Have an Interest In. List	any real estate in Part 1.
	o to Part 6.	y legal or equit	able interest in any business-re	elated property?	
	o to mart o. So to line 38.				
165.	0 to mie 36.				
					Current value of the portion you own? Do not deduct secured claims or exemptions.
Accounts	receivable or	commissions y	ou already earned		
No No	ę				
Yes. D	escribe				0.00

☐ Yes. Describe....

No No

Debtor 1	Case Ariel First Name	16-27128 B Middle Name		Filed 08/24 LittleDocumen		Entered 08/24/16 09:0 Page 19 of Sel number (if known			
40. Machine	ery, fixtures,	equipment, si	upplies you	use in business, a	and to	ols of your trade			
☑ No						-			
Yes.	Describe		THE RESERVE OF THE PERSON NAMED IN THE PERSON		hAlminen ensemas		and the second s		0.00
			angent real and an extensive AASS (\$1 common ex-				PRODUCED STREET, STREE		0.00
41. Inventor	r y								
⊿ No			Commence of the first half has been been been been been been been bee	of the state of th	www.qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq	والمنافذة والمنافذة والمراكب والمنافذة والمناف	entre de la company		
☐ Yes.	Describe							\$	0.00
				and the second of the second Annique of the second of the			ANTENNY OF THE STREET AND ASSESSED ASSESSEDANCE ASSESSED ASSESSEDA	- Continues of	
42.Interests	in partners	hips or joint v	entures						
	Describe	Name of enti	.						
							of ownership:		0.00
							% %	\$	0.00
							~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	\$ \$	0.00
						***************************************	,,,	<u> </u>	· · · · · · · · · · · · · · · · · · ·
43. Custome	er lists, maili	ng lists, or oth	ner compilat	tions					
	Do your list:	s include pers	onally ident	ifiable information	ı (əs d	efined in 11 U.S.C. § 101(41A))?			
	□ No	·							
	Yes. Des	cribe	The state of the s	het breits a terrete ar name anne an ainmeath a dheal ann an an ann ann ann ann ann ann ann	*******************************		***************************************		0.00
								\$	0.00
44. Any busi	ness-related	l property you				and the second s		ananana.	
₩ No				•					
	Give specific							\$	0.00
								\$	
							And the second s	¢	0.00
							***************************************	\$	0.00
							- A - V - V - V - V - V - V - V - V - V	Φ	0.00
								<b>a</b>	0.00
- 4110			***		***			\$	0.00
5. Add the o	dollar value  5. Write that	of all of your e number here	ntries from	Part 5, including a	any er	tries for pages you have attache	d	\$	0.00
	TO THE STATE OF TH	arithmet tiere			***********	***************************************	→		
			******************************	**************************************		erenne y ere ere erenne er, den er nimmen er zoten, y den erennen		erararenta kalendaria eta era era eta eta eta eta eta eta eta eta eta et	
Part 6:	Describe A	ny Farm- and	d Commer	cial Fishing-Rela	ated	Property You Own or Have a	n Interest	In.	
ſ	f you own o	r have an inter	est in farml	and, list it in Part 1	1.			••••	:
6 Do vou o	un or have e	ny logol or on	vitalete inte						
o. <b>Do you o.</b> ✓ No. Ge	o to Part 7.	illy legal or eq	uitable intel	rest in any farm- oi	r com	mercial fishing-related property?	•		mandrick participation with
	3o to line 47.								1 to
								Current val	
								portion you	own?
7 Ea								Do not deduct or exemptions	secured claims
7. <b>Farm ani</b> r Examples		oultry, farm-rai	end fich						\$
☑ No	. Ξανοσιστικ, μ	outuy, idilii-tas	aca 11911						
	I				******************************			ranar ran	
-	House								0.00
	1,	***************************************			nin britan i <b>ar</b> an manaan		ann ann an Aireann ann an Aireann	\$	0.00
		errore and the second							

	t Name Middle Name La:	LittleDocumer	<u> </u>	aye 20 C	fose number (# known)	De		
48. Crops—eithe	r growing or harvested							
☑ No	. g.oumg of marvested							
Yes. Give	specific		mira kamama <u>a sa sa dalam</u> a na					
information	The state of the s						\$	0.0
49. Farm and fish No	ing equipment, implements, m	nachinery, fixtures,	and tool	s of trade				
Yes			at terrasion was designed probabilism as a sec	rannana kantonina ankonomina ankonomina kantonina (h.m.)				
	Or place to the control of the contr						\$	0.0
0. Farm and fish	ing supplies, chemicals, and fo	and	and a series of the series of	anning and and probability of the second sections of angles	والمراقب	anna managan an a	J	
☑ No		eeu						
☐ Yes	*** ** ** * * * * * * * * * * * * * *		ang di Papangan pang kanananan kanananan di pang-	errant a promote Planskylot, było było zerranykos kapian				
							\$	0.0
1. Any farm- and	commercial fishing-related pr						nam!	******
☑ No ☐ Yes. Give s								
information							\$	0.0
clich adt bbA	ryalis of all of years and the first				The state of the s	***************************************	<b>P</b>	
for Part 6. Wri	r value of all of your entries fro te that number here	m Part 6, including	any entr	ies for page	s you have attached	-	\$	0.00
Examples: Seaso  No Yes. Give s	en tickets, country club membership	did not already list?	? 			the same of the same of	\$	0.00
Examples: Seaso No Yes. Give s information.	pecific						\$ \$ \$	0.00
Examples: Seaso No Yes. Give s information.	en tickets, country club membership			here			\$ \$ \$	0.00
No No Yes. Give s information.  Add the dollar	value of all of your entries from	n Part 7. Write that	number i			***	\$ \$ \$	0.00
No No Yes. Give s information.  Add the dollar  art 8: List t	value of all of your entries from	n Part 7. Write that	number (			<b>-</b>	\$ \$ \$	0.00
No Yes. Give s information.  Add the dollar  Art 8: List 1  Part 1: Total rea	value of all of your entries from the Totals of Each Part al estate, line 2	n Part 7. Write that	number i	0.00		——————————————————————————————————————	\$ \$ \$	0.00
No Yes. Give s information.  Add the dollar  Part 1: Total rea  Part 2: Total ve  Part 3: Total pe	value of all of your entries from	n Part 7. Write that	number (			***	\$ \$ \$	0.00
No Yes. Give s information.  Add the dollar  Part 8: List to Part 2: Total real Part 3: Total pert 4: Total fin	value of all of your entries from the Totals of Each Part al estate, line 2 hicles, line 5 rsonal and household items, li	of this Form	number (	0.00		*	\$\$ \$	0.00
Examples: Seaso No No Yes. Give s information.  Add the dollar  Part 8: List t Part 1: Total rea Part 2: Total ve Part 3: Total pe Part 4: Total fin Part 5: Total bu	value of all of your entries from the Totals of Each Part al estate, line 2 hicles, line 5 rsonal and household items, li ancial assets, line 36	of this Form	number (	0.00 200.00 0.00			\$\$ \$\$	0.00
Examples: Seaso No Yes. Give s information.  Add the dollar  Add the dollar  Part 8: List t  Part 1: Total rea  Part 2: Total ve  Part 3: Total pe  Part 4: Total fin  Part 5: Total bu  Part 6: Total far	value of all of your entries from the Totals of Each Part al estate, line 2 hicles, line 5 rsonal and household items, li ancial assets, line 36 siness-related property, line 48	of this Form  ine 15  y, line 52	number (	0.00 200.00 0.00			\$\$ \$\$	0.00
No Yes. Give s information.  Add the dollar  Add the dollar  Part 1: Total rea  Part 2: Total ve  Part 3: Total pe  Part 4: Total fin  Part 5: Total bu  Part 6: Total far  Part 7: Total other	value of all of your entries from the Totals of Each Part al estate, line 2 hicles, line 5 rsonal and household items, li ancial assets, line 36 siness-related property, line 48 m- and fishing-related property ner property not listed, line 54	of this Form  ine 15  y, line 52	number   \$	0.00 200.00 0.00 0.00 0.00		:	\$\$ \$\$	0.00
No Yes. Give s information.  Add the dollar  Part 1: Total rea  Part 2: Total ve  Part 3: Total pe  Part 4: Total fin  Part 5: Total bu  Part 6: Total far  Part 7: Total other	value of all of your entries from the Totals of Each Part al estate, line 2 hicles, line 5 rsonal and household items, li ancial assets, line 36 siness-related property, line 48 m- and fishing-related property	of this Form  ine 15  y, line 52	ssssssssss	0.00 200.00 0.00 0.00 0.00		:	\$\$ \$\$ \$	0.00
Examples: Seaso No Yes. Give s information.  Add the dollar  Add the dollar  Part 1: Total rea Part 2: Total ve Part 3: Total pe Part 4: Total fin Part 5: Total bu  Part 6: Total far Part 7: Total oth Total personal p	value of all of your entries from the Totals of Each Part al estate, line 2 hicles, line 5 rsonal and household items, li ancial assets, line 36 siness-related property, line 48 m- and fishing-related property ner property not listed, line 54	of this Form  of this Form  ine 15  y, line 52  +	number	0.00 200.00 0.00 0.00 0.00 200.00	Copy personal property tot	:	\$\$ \$\$ <b>**</b>	0.00

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 21 of 54

Debtor 2 Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: Northern District of Illinois  Ease number If known)  Check if this i amended filin	First Name	B Middle Name	Little		
Interest States Bankruptery Court for the Northern District of Illinois    Check if this is armended filing	Debtor 2	Middle Name	Last Name		
check if this is amended filling ficial Form 106C  Chedule C: The Property You Claim as Exempt  as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, git the property you isted on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more ce is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the log of any additional pages, write in name and case number if Knowly, you may claim the fill fair market value of the property being exempted up to the amount of the exemption you claim. One way of doing so is to state a certific dollar amount as exempt. Atternatively, you may claim the full fair market value of the property being exempted up to the amount may applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt may applicable in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that its the exemption to a particular dollar amount, however, if you claim an exemption of 100% of fair market value under a law that its the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption and be limited to the applicable statutory amount.  If I Identify the Property You Claim as Exempt  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  If You are claiming state and federal nonbankruptoy exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.  Brief description of the property and line on Schedule A/B that lists this property  Copy the value from Check only one box for each exemption.  Specific laws that allow exemption of market value, up to any applicable statutory limit  Brief description:  Line from Schedule A/B:  1			<u></u>		
Chedule C: The Property You Claim as Exempt  04/1  ss complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying cornect information by the property you used and socretile. All: Property (Cifical Form 10AGA) as your source, list the property had you claim as exempt. If more ce is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write ranner and case number (if known).  each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a crific dollar amount as exempt. Attendatively, you may claim the full fair market value of the property being exempted up to the amount yn applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain boardits, and tax-exempt rement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value as the the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption lide be limited to the applicable statutory amount.  If 15 Identify the Property You Claim as Exempt  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  If you are claiming state and tederal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  For any property you list on Schedule A/B that you claim as exempt.  Brief description of the property and line on Schedule A/B that lists this property property property you were claiming federal exemptions. 11 U.S.C. § 522(b)(3)  For any applicable statutory limit  Brief description:    Household Furniture		mern District of Illinois			
Chedule C: The Property You Claim as Exempt  as complete and accurate as possible. If Nor married people are filing together, both are equally responsible for supplying correct information in gith property you listed on Schedule All: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more ce is needed, fill out and attach to this page as many copies of Part 2-Additional Pages as necessary. On the top of any additional pages, write in neme and case number (if known).  If you are claiming that and the complete and exemptions are you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a celfic dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount may applicable statutory inmit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt rement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that to the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption do be limited to the applicable statutory amount.  If I Identify the Property You Claim as Exempt  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  You are claiming state and federal exemptions. 11 U.S.C. § 522(b)(3)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.  Brief description:  Cloy the value from Schedule A/B that lists this property  Cloy the value from Schedule A/B.  Finef description:  Line from Schedule A/B.  1					Check if this is
as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, and the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more ce is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write reamen and case number (if known).  **each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a critic dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount may applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt rement funds—may be unlimited in doilar amount. However, if you claim an exemption of 100% of fair market value under a law that tax the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption and be limited to the applicable statutory amount.  **Which set of exemptions are you claim as Exempt  **Which set of exemptions are you claiming? **Check one only, even if your spouse is filing with you.**  **You are claiming state and faderal nonbankruptory exemptions. 11 U.S.C. § 522(b)(3)  **For any property you list on Schedule A/B that you claim as exempt, fill in the information below.**  **Brief**  **Brief**  **Brief**  **Brief**  **Clothings**  **Specific laws that allow exemption.  **Schedule A/B**  **Journal of the property limit  **Are you claiming a homestead exemption of more than \$160,3757  **Subject to edjustment on 4/01/					amended ming
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ing the property you lated on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more ce is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write reason and case number (if known).  **each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a citieft dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount my applicable statutory limit. Some exemptions—such as those for health alds, rights to receive certain benefits, and tax-exempt rement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that the exemption to a particular dollar amount, and the value of the property is determined to exceed that amount, your exemption and be limited to the applicable statutory amount.  **Identify the Property You Claim as Exempt**  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  *Identify the Property You Claim as Exempt**  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  *Identify the Property You Claim as Exempt**  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  *Identify the Property You Claim as Exempt**  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  *Identify the Property You Claim as Exempt**  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  *Identify the Property You Claim as Exempt**  Which set of exemptions of the property and line on Schedule A/B that lists this property and line on Schedule A/B.  *Identify the Property You Claim as Exempt**  *Identify the Property You Claim as Exempt**  *Identify the Property You Clai					
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art 1: Identify the Property You Claim as Exempt  Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ¬You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.  Brief description of the property and line on Schedule A/B that lists this property  Copy the value from Schedule A/B that lists this property  Check only one box for each exemption.  Schedule A/B.  Brief description: Household Furniture \$0.00	rement funds—may be unlimited in	n dollar amount. Howeve	er, if you claim an exemptic	on of 100% of fair market value	under a law that
Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.  Brief description of the property and line on Schedule A/B that lists this property  Copy the value from Schedule A/B that lists this property  Copy the value from Schedule A/B.  Brief description: Household Furniture \$0.00	its the exemption to a particular do	ollar amount and the valu	ue of the property is deterr	nined to exceed that amount, y	our exemption
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Line from Schedule A/B: 6		Schedule A/B	ere proceeding a statute paid.		
Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description:  Line from Schedule A/B:  Brief description:  Brief description:  Schedule A/B:  Brief description:  Schedule A/B:  Brief description:  Schedule A/B:  Are you claiming a homestead exemption of more than \$160,375?  (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)  No	Brief Household Furn				S 5/12-1001(b)
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(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)  No	Brief description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description: Line from	**************************************	\$ 0.00  100% of fair rany applicable  \$ 200.00  100% of fair nany applicable  \$	735 ILC  narket value, up to e statutory limit  735 ILC  narket value, up to e statutory limit  narket value, up to	
□ No	Brief description: Line from Schedule A/B:	\$200.00 \$\$	\$ 0.00  100% of fair r any applicable  \$ 200.00  100% of fair n any applicable  \$ 100% of fair n any applicable	735 ILC  narket value, up to e statutory limit  735 ILC  narket value, up to e statutory limit  narket value, up to	
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Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 22 of 54

Debtor 1	Ariel	В	Little	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	ng) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court fo	r the: Northern District of II	linois	
Case numbe				1

Check if this is an amended filing

#### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

for each claim. If more than one creditor As much as possible, list the claims in all	more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. ohabetical order according to the creditor's name.	Column A Amount of Do not ded value of co	of claim luct the		rB of collateral upports this	Column C Unsecured portion If any
2.1	Describe the property that secures the claim:	<ul> <li>enderweistratering</li> </ul>	0.00	e e e e e e e e e e e e e e e e e e e	0.00	0.00
Creditor's Name	Todalisa the property that aecures the Claim.	Ф ¬		<b>a</b>		,
Number Street						
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	<ul> <li>An agreement you made (such as mortgage or secured car loan)</li> <li>Statutory lien (such as tax lien, mechanic's lien)</li> </ul>					
☐ Check if this claim relates to a	Judgment lien from a lawsuit  Other (including a right to offset)	<del></del>				
	Other (including a right to offset)	-				
☐ Check if this claim relates to a community debt	Other (including a right to offset)  Last 4 digits of account number		0.00	\$	0.00 ¢	
Check if this claim relates to a community debt  Date debt was incurred	Other (including a right to offset)	\$	0.00	\$	0.00 \$	0.00
Check if this claim relates to a community debt  Date debt was incurred  2.2	Other (including a right to offset)  Last 4 digits of account number		0.00	\$	0.00 \$	0.00
Check if this claim relates to a community debt  Date debt was incurred  2.2  Creditor's Name	Other (including a right to offset)  Last 4 digits of account number	\$	0.00	social monoconductor course	0.00 \$	0.00
Check if this claim relates to a community debt  Date debt was incurred  2.2  Creditor's Name  Number Street	□ Other (including a right to offset)  Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated □ Disputed	\$	0.00	S	0.00 §	0.00
Check if this claim relates to a community debt  Date debt was incurred  2.2  Creditor's Name  Number Street  City State ZIP Code	□ Other (including a right to offset)  Last 4 digits of account number  Describe the property that secures the claim:  As of the date you file, the claim is: Check all that apply.  □ Contingent □ Unliquidated	\$	0,00	\$	0.00 \$	0.00

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 23 of 54

Debtor 1	Ariel	В	Little	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if fili	ng) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court	for the: Northern District	of Illinois	Z
Case numb (If known)	er		***************************************	

Check if this is an amended filing

#### Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have priority unsecured claim	ns against you?				***************************************
No. Go to Part 2.					
Yes.					
<ol> <li>List all of your priority unsecured claims. If a c each claim listed, identify what type of claim it is. I nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of</li> </ol>	reditor has more than one priority unsecured claim, list to a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's not part 1. If more than one creditor holds a particular claim	at clair ame. If	n here and sho	w both priority	and
(For an explanation of each type of claim, see the	instructions for this form in the instruction booklet.)	Tota			opriority ount
2.1			0.00 =	0.00-	
Priority Creditor's Name	Last 4 digits of account number	\$	0.00 \$	0.00 \$	0.00
	When was the debt incurred?				
Number Street					
	As of the date you file, the claim is: Check all that apply	<i>Į</i> .			
City State ZIP Code	☐ Contingent				
,	☐ Unliquidated				
Who incurred the debt? Check one.  Debtor 1 only	☐ Disputed				
Debtor 1 only Debtor 2 only	T				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
At least one of the debtors and another	Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government				
	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>				
Is the claim subject to offset?	Other. Specify				
Yes	— Ottes, Specify	•			
может по поставления по поставления по поставления по по поставления по поставления по поставления по поставления по по поставления по		Websielle Awsensieren			SASSA SAACA SAASA AA
Priority Creditor's Name	Last 4 digits of account number	\$	0.00 \$	0.00 \$	0.00
	When was the debt incurred?				
Number Street					
	As of the date you file, the claim is: Check all that apply				
	Contingent				
City State ZIP Code	Unliquidated				
Who incurred the debt? Check one.	☐ Disputed				
☐ Debtor 1 only	Type of PRIORITY unsecured claim:				417
Debtor 2 only	Domestic support obligations				
<ul> <li>Debtor 1 and Debtor 2 only</li> <li>At least one of the debtors and another</li> </ul>	Taxes and certain other debts you owe the government				
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated				THE PARTY OF THE P
Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify				editable (A.A. Garage V. ). The A. C.

Debtor 1

Document Ariel В First Name Middle Name

Case number (if known)_

	art 2: List All of Your NONPRIORITY U			
3.	Do any creditors have nonpriority unsecured			
	No. You have nothing to report in this part. S			
4.	diseconde digiti, ilst ine diediti seni	in the alphabetic	al order of the creditor who holds each claim. If a creditor ha aim. For each claim listed, identify what type of claim it is. Do no nom, list the other creditors in Part 3.If you have more than three no	
4.1	American Financial Choice			Total claim
ļ	Nonpriority Creditor's Name		Last 4 digits of account number 8 8 1 9	\$ 521.0
	2 West Madison Street 200		When was the debt incurred? 09/27/2010	Ψ
	Oak Park IL.	60302		
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only		☐ Contingent☐ Unliquidated☐ Disputed☐	
	Debtor 2 only		_ Disputed	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:  Student loans	
	Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?		that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	☑ No		Other, Specify Charge off Collection	
	☐ Yes			
4.2	Com Ed	naminal rank melapatan penjarah menantuk menantuk penjarah sebagai sebagai sebagai sebagai sebagai sebagai seb	Last 4 digits of account number 8 8 1 9	\$ 8,000.00
	Nonpriority Creditor's Name		When was the debt incurred? 08/19/2016	Ψ
	PO Box 6111		<del></del>	
	Number Street Carol Stream IL.	60407	As of the date you file, the claim is: Check all that apply.	
1	City State	60197 ZiP Code	To the state of th	
	Who incurred the debt? Check one.		☐ Contingent ☐ Unliquidated	
	Debtor 1 only		Disputed	
	Debtor 2 onlys			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	☑ No		Other. Specify Utility	
	Yes		NAME AND ADDRESS OF THE PARTY O	
4.3	Sprint Wireless		Last 4 digits of account number 8 8 1 9	
	Nonpriority Creditor's Name		When was the debt incurred? 08/19/2016	s 1,200.00
	6391 Sprint Parkway			
	Overland Park KS	66251		
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.		Contingent	
	Debtor 1 only		☐ Unliquidated ☐ Disputed	
	Debtor 2 only		a Disputed	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
			☐ Student loans	
	Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?		that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	☑ No ☐ Yes		Other. Specify Cell	
	<b>→</b> 165		,	

Debtor 1

Ariel	В
First Name	Middle Name

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Case number (if known)_

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Lt.	

Your NONPRIORITY Unsecured Claims — Continuation Page

T-Mobile Bankruptcy Team			Last 4 digits of account number 8 8 1 9	s 1.000.0
Nonpriority Creditor's Name PO Box 53410			When was the debt incurred? 08/19/2016	\$
Number Street Bellevue	WA	98015	As of the date you file, the claim is: Check all that apply.	
City  Who incurred the debt? Check one.  Debtor 1 only	State	ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth			Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
<ul> <li>□ Check if this claim is for a commoder</li> <li>Is the claim subject to offset?</li> <li>☑ No</li> <li>□ Yes</li> </ul>	nunity debt		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify.	
At& T Mobility Nonpriority Creditor's Name		maaneedise talkistatsi kalaikiksi teläitää lääneen aunua eerinjaa joja pul	Last 4 digits of account number 8 8 1 9	\$_1,501.00
PO Box 5001			When was the debt incurred? 08/19/2016	
Number Street Carol Stream	IL.	60197	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
Debtor 1 only			Conspilled	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and anoth	er		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
Check if this claim is for a comm	unity debt		you did not report as priority claims	
s the claim subject to offset? ☑ No ☑ Yes			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Cellular	
CF Bank - Bankrupcty Dept		ka feraganan pengangan panamangan caraman na manamen nemberak nemberak nembe	Last 4 digits of account number 8 8 1 9	\$_5,501.00
lonpriority Creditor's Name 15350 Cedar Avenue			When was the debt incurred? 08/19/2016	
fumber Street Apple Valley itv	MN.	55124 ZIP Code	As of the date you file, the claim is: Check all that apply.	
nty	State	ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
☑ Debtor 1 only ☐ Debtor 2 only			Type of MONDBIODITY	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	er		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
Check if this claim is for a comm	unity debt		you did not report as priority claims	
the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Collection	
₫ No			a one. opony one of the	

Debtor 1

∖riel		

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iei	B	Little Document
s! Name	Middle Name	last Name

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

_				
Comcast			Last 4 digits of account number 8 8 1 9	¢ 300.00
Nonpriority Creditor's Name			When was the debt incurred? 08/19/2016	Ψ
PO Box 3002			when was the debt incurred?	
Number Street Southeastern	PA	19398	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Million Const.			Unliquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only  At least one of the debtors and another			☐ Student loans	
			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a communication	nity debt		you did not report as priority claims	
s the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Digital TV	
₩ No			otner, Specify Digital 1 V	
Yes				
Midwest Recovery	STREET, ST.	n en	Last 4 digits of account number 8 8 1 9	s 2.094.00
onpriority Creditor's Name			00/00/0040	*
2747 WEst Clay St			When was the debt incurred? 08/08/2016	
lumber Street			An of the date was 600 at a state of the first of the fir	
Saint Charles	МО	63301	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Vho incurred the debt? Check one.			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Tuno of MONDRIODITY uncertained alsies	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another			Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a commun	ity debt		Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?			Other. Specify Multi Collection Accounts	
<b>Z</b> No				To any or a second
<b>1</b> Yes				
CONTRACTOR AND	<del>Deliver of the State of the St</del>			\$ 302.00
Credit Discount & Aud	·		Last 4 digits of account number 8 8 1 9	Ψ
onpriority Creditor's Name			When was the debt incurred? 01/05/2012	PANELIAN
15 East Main - PO B 213			**- UGII WGS THE GERT HICHLIAG.	MAY Work I I I I
umber Street Streator	13	64364	As of the date you file, the claim is: Check all that apply.	Amazor / ru
	State	61364 ZIP Code		VI V
~	Ciato	air Code	Contingent Unliquidated	at garage
ho incurred the debt? Check one.			Disputed	v april
Debtor 1 only			Cioparod	Address Addres
Debtor 2 only			Type of NONPRIORITY unsecured claim:	1
Debtor 1 and Debtor 2 only			☐ Student loans	***************************************
At least one of the debtors and another			<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>	Number of the second
			you did not report as priority claims	str state
Check if this claim is for a some	to date			
Check if this claim is for a communi	ty debt		Debts to pension or profit-sharing plans, and other similar debts	model A visit a visit
Check if this claim is for a communi the claim subject to offset?	ty debt			months of the control

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Ariel B Little Document Page 27 of 54

Debtor 1

Ariel	В
11.101	_

	First Name	Middle Name	Last Name	Case Harriber (# Known)
Part 2:	List All of Y	our NONPRI	ORITY Unsecured Claims	

				11-2	
3.	Do any creditors have nonpriority uns	secured c	laims against	vou?	
	No. You have nothing to report in this	s nart Sul	nmit this form to	the court with your other echodules	
	☐ Yes	o part. Ou	onne uno ionni te	the court with your other schedules.	
ąλ.					Adams Vis. Nations (1977)
4.	List all of your nonpriority unsecured	claims in	the alphabetic	al order of the creditor who holds each claim. If a creditor ha	s more than one
A 100	monthiomy unsecuted cidin, itst me cred	nor sebar	ately for each cl	am Foreach claim listed identify what two of daim it is Done	tict alaban alasadı.
	microscommant, a more than one treu	ILOI NOIDS :	a particular clai	m, list the other creditors in Part 3.If you have more than three no	onpriority unsecured
	claims fill out the Continuation Page of P	art 2.			
					Sere i se sa del como de la como d
	<b>]</b>				Total claim
h <del>. 1</del>	Chex System			Last 4 digits of account number 8 8 1 9	
	Nonpriority Creditor's Name				\$0.00
	7805 Hudson Road			When was the debt incurred? 08/19/2016	
	Number Street	····			
	Woodberry	MN	55125		
		State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	·	0	zii Code		
				Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated	
	☑ Debtor 1 only			☐ Disputed	
	Debtor 2 only			·	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another				
				Student loans	
	Check if this claim is for a communi	ity debt		Obligations arising out of a separation agreement or divorce	
	le the claim publicat to affect?			that you did not report as priority claims	
	ls the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	i
	₩ No			Other, Specify Old Accounts	
	☐ Yes				
	PROPERTY OF THE PROPERTY OF TH	~*************************************			Professor Charles Source Sense of Professor Sense (17 of the Professor Sense Sense Sense (18 of the Professor Sense Sens
2	Equifax Bankruptcy Dept			Last 4 digits of account number 8 8 1 9	\$0.00
	Nonpriority Creditor's Name	+- <del></del>		When was the debt incurred? 08/19/2016	
	P.O. Box 740241				
	Number Street			<del></del>	
		GA	30374	As of the date you file, the claim is: Check all that apply.	
		State	ZIP Code	<del></del>	
	5,	state	ZIF Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	☑ Debtor 1 only			☐ Disputed	
	Debtor 2 only				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another				
	At least one of the debtors and another			Student loans	
	Check if this claim is for a communit	hy daht		Obligations arising out of a separation agreement or divorce	
		ty Geot		that you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
	☑ No			Other. Specify Notice Only	
	☐ Yes				
, ]	S SAMMER PART TO THE PART STATE AND A STATE AND A SAMMER	denimonenta onconcreto servi	ar Colomba el escalara escamonymosas el escala escolar	$1 \leq k \leq $	indexts/stacking building biological properties and
	Experian Bankruptcy Dept			Last 4 digits of account number8819	0.00
	Nonpriority Creditor's Name			00//0/00/	\$0.00
	P.O. Box 2002			When was the debt incurred? $08/16/2016$	
	Number Street		***************************************	Hove	
	Allen	TX	75013		
		tate	ZIP Code	- As of the date you file, the claim is: Check all that apply.	
				Confingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only				:
	Debtor 2 only			☐ Disputed	
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	
	At least one of the deptors and another			Student loans	
	☐ Check if this claim is for a community	v debt		Obligations arising out of a separation agreement or divorce	Y comme
		,		that you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	1
	□ No			Other. Specify Notice Only	The state of the s
	☐ Yes			Guier, Specify INOUICE OF ITY	

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 28 of 54

Debtor 1

В

Little

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Trans Union Bankruptcy De	pt		Last 4 digits of account number 8 8 1 9		s.	0.0
Nonpriority Creditor's Name P.O. Box 1000			When was the debt incurred? 08/19/2016		Ψ	
Number Street Chester	PA	19022	As of the date you file, the claim is: Check all that apply.			
City  Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed			
Debtor 1 only Debtor 2 only			·			
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:  Student loans			
At least one of the debtors and anot			Obligations arising out of a separation agreement or divor	rce that		
Check if this claim is for a com	nunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar			
s the claim subject to offset? ☑ No ☑ Yes			Other. Specify Notice Only	uesis		
Certegy Check Service	allungung og legge 1994 Gildelikk Salasak kilol sedalungung	to the second control of the second control	Last 4 digits of account number 8 8 1 6	and the section of the control of the section of the control of the section of the control of the section of th	***************************************	0.
Ionpriority Creditor's Name			When was the debt incurred? 08/16/2016			
P.O. Box 30046 umber Street						
ampa	FL	33630	As of the date you file, the claim is: Check all that apply.			
ity	State	ZIP Code	Contingent			
Vho incurred the debt? Check one.			Unliquidated Disputed			
Debtor 1 only			<b>,</b>			
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:			
At least one of the debtors and anoth	er		Student loans			
Check if this claim is for a comm	unity debt		<ul> <li>Obligations arising out of a separation agreement or divorce you did not report as priority claims</li> </ul>	ce that		
the claim subject to offset?	idinty dept		Debts to pension or profit-sharing plans, and other similar	debts		
No			Other. Specify Notice Only			
Yes		·				
ennersia saute enemere en enemere en contract con constante en	Oliver's free-environment engages vog bytelet	COMA CHICLANA MININE CANANICA MANAGARA MANAGARA MANAGARA MANAGARA MANAGARA MANAGARA MANAGARA MANAGARA MANAGARA	Last 4 digits of account number 8 8 1 9	9	Martin Control School	265.0
Creditors Discount & Aud Onpriority Creditor's Name			4010465			
15 East Main - POB 213			When was the debt incurred? 10/04/2011			
treator	IL	61354	As of the date you file, the claim is: Check all that apply.			
¥	State	ZIP Code	Contingent			
ho incurred the debt? Check one.			Unliquidated			
Debtor 1 only			☐ Disputed			
Debtor 2 only			Type of NONPRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	_		☐ Student loans			
			Obligations arising out of a separation agreement or divorce	e that		
Check if this claim is for a comm	unity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar of	iehts		
the claim subject to offset?			Other, Specify Collection Medical			
No						

Debtor 1

В First Name

Little Document

Page 29 of 54 Case number (#known)_

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

	fter listing any entries on this p				
	Cook Lawe Magistrate -	Richard J. D	aley Center	Last 4 digits of account number 6 7 6 7	_{\$_3,377.00}
	50 West Wasthington S	treet		When was the debt incurred? 01/19/2014	
	Number Street Chicago	IL.	60602	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check Debtor 1 only	one.		Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and	l another		Student loans	
	☐ Check if this claim is for a			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	
	Is the claim subject to offset?			Other. Specify Judgement	
	¥ No ☐ Yes				
	People's Gas			Last 4 digits of account number 8 8 1 9	\$ 615.00
	200 East Randolph			When was the debt incurred? 01/13/2012	
	Number Street Chicago	IL	60601	As of the date you file, the claim is: Check all that apply.	
÷	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check	one.		☐ Unliquidated☐ Disputed	
	Debtor 1 only			☐ Disputed	V Zambyk z dy.
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	7.
	Debtor 1 and Debtor 2 only  At least one of the debtors and	another		Student loans	West and a second
	Check if this claim is for a c			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	100
		community debt		Debts to pension or profit-sharing plans, and other similar debts	- Antique
	Is the claim subject to offset?			Other. Specify Old Account	1.
	☐ Yes				noord Andrew Cympe
	THE STATE OF THE S	THE COLUMN TWO IS NOT THE COLUMN THREE THE COLUMN THREE THRE	est Montening resident and account and account and account and the property of the project of th		\$ 1,010.00
	First Midwest Bank			Last 4 digits of account number 8 8 1 9	\$
	Nonpriority Creditor's Name  11210 Lincoln Hwy  Number Street			When was the debt incurred? 08/19/2016	n veri a volumentaria.
	Mokena	IL	60448	As of the date you file, the claim is: Check all that apply.	Al General volume
	City	State	ZIP Code	Contingent	WANNERADA
	Who incurred the debt? Check of	ne.		Unliquidated	PANINANA
	Debtor 1 only			☐ Disputed	id the medical type
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	uncerann en alph
	Debtor 1 and Debtor 2 only At least one of the debtors and a	enother		Student loans	hyphhod moann
				Obligations arising out of a separation agreement or divorce that you did not report as priority claims	resour Forentian
	Check if this claim is for a co	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  No Yes			☑ Other. Specify Old Account	Basespeeduring Appening a 1 A ge

Page 30 of 54

Ariel Debtor 1 First Name

В

Little

Document

Case number (# known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

	1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 1000 10	VANDOVANIA DA SANSKALAD
 PLS	Last 4 digits of account number 8 8 1 9	s 1,500.00
Nonpriority Creditor's Name 177 West Lake Street	When was the debt incurred? 08/19/2016	Ψ
Number Street	THE HAS HE GEST HEAT BUT INC.	
	As of the date you file, the claim is: Check all that apply.	
City State ZIP (	www Countingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Payday Loan	
<b>☑</b> No		
Yes		
 National Ouisies Cook	Last 4 digits of account number 8 8 1 9	
National Quick Cash Nonpriority Creditor's Name	Last 4 digits of account number 0 0 1 9	\$ <u>1,000.00</u>
3168 South Ashland Avenue	When was the debt incurred? 08/19/2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	000	
City State ZIP C	Contingent Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	_ <del></del>	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?	Other. Specify Payday Loan	
☑ No	·	
☐ Yes		
		_{\$} 300.00
Uptown Cash Nonpriority Creditor's Name	Last 4 digits of account number 8 8 1 9	
8641 South Cottage Grove	When was the debt incurred? 08/19/2016	
Chicago IL 606	As of the date you file, the claim is: Check all that apply.	
City State ZIP Co		
Who incurred the debt? Check one.	☐ Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
₩ No	☑ Other. Specify Payday Loan	
Yes		

Debtor 1

Little Document Page 31 of 54
Case number (if known)

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

															0.0000000000000000000000000000000000000
First Rate Financial Nonpriority Creditor's Name	<b></b>		L	Last	4 digits	of accou	unt numl	ber	8	8	1	9_			s 1,000.0
1916 East 95th Street			V	Whe	n was the	e debt ir	ncurred?	?	08/1	9/2	016	<u> </u>			
	IL	60617	Α	As o	f the date	e you file	e, the cla	aim	is: Ch	neck	all th	at app	у.		
Who incurred the debt? Check one.  Debtor 1 only	State	ZIP Code		<b></b> (	Contingent Inliquidate Disputed										
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another				☐ s	of <b>NONI</b> tudent loa bligations	ans					amani	t or div	arna tir	nat	
☐ Check if this claim is for a communits the claim subject to offset? ☑ No ☐ Yes	ty debt			ם ם	ou did not lebts to pe lther. Spec	t report as ension or	s priority o profit-sha	claim ering	is plans						
	common annian di Colonia del C	o Mariera de America de America de America de Constante de Constante de Constante de Constante de Constante de	Lá	_ast 4	4 digits o	of accou	nt numb	er _	MESON SAFOR MATERIAL	iket 4 saars soos	24004294624488	ii)))riinidetalusuurc	annan makiink	PARKER MANAGEM	sianing of the state of the sta
Nonpriority Creditor's Name		-			was the										-
Number Street			A:	As of	the date	you file	, the cla	im i	s: Che	eck a	all tha	it apply	<i>I</i> .		
City	itale	ZIP Code		<b>1</b> c	ontingent										
Who incurred the debt? Check one.  Debtor 1 only					nliquidated sputed	d									
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another				⊒ st	of <b>NONP</b> udent loar	ns									
☐ Check if this claim is for a communit is the claim subject to offset? ☐ No	y debt			уо Э De	oligations of ou did not re obts to per her. Speci	report as nsion or p	priority cl profit-shar	laims ring (	s plans,	and	other	r simila			
☐ Yes															
		ng nganggang ng nganggang ng n	La	ast 4	digits of	f accour	nt numbe	er _		******	- Andrews		rhii4alikicalessumane,	CONTRACTOR AND	\$
Nonpriority Creditor's Name			WI	/hen	was the	debt inc	urred?		***************************************						
Number Street			As	soft	the date	you file,	the clai	m is	: Che	ck a	ll that	apply			
	ate	ZIP Code			ntingent liquidated	•									
Who incurred the debt? Check one.  Debtor 1 only					sputed	•									
Debtor 2 only Debtor 1 and Debtor 2 only					f NONPI		<b>Y</b> unsect	urec	l clair	n:					
At least one of the debtors and another				Ob	ident loan: ligations a	arising ou	t of a sep	arati	on ag	reen	nent c	or divo	ce tha	<b>i</b> t	
☐ Check if this claim is for a community is the claim subject to offset?	/ debt			you Del	ı did not re bts to pen:	eport as passion or p	oriority cla rofit-shari	aims ng p	lans, a	and a	other	similar			
No Yes				Oth	ner. Specif	fy									

Case 16-27128

Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Page 32 of 54

Debtor 1

В First Name

Little

Case number (if known)

Part 3:

List Others to Be Notified About a Debt That You Already Listed

2, then list the collection agence additional creditors here. If you d	y here. S lo not ha	imilarly, if you have ve additional per	It your bankruptcy, for a debt that you already listed in Parts 1 or 2. For you for a debt you owe to someone else, list the original creditor in Parts 1 or eve more than one creditor for any of the debts that you listed in Parts 1 or 2, list the sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Account Receivable Mana	agemer	nt	On which entry in Part 1 or Part 2 did you list the original creditor?
910 West Van Buren 245			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Chicago		C0C07	Last 4 digits of account number 8 8 1 9
City	IL State	60607 ZIP Code	
SW Credit System		AND COLOR OF PERSONS AND SOLES AND SOLES AND SOLES AND SOLES	On which entry in Part 1 or Part 2 did you list the original creditor?
4120 International Py 110	0		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
		W	Claims
Carrollton City	TX State	75007 ZIP Code	Last 4 digits of account number 8 8 1 9
Midwest Recovery System	ns		On which entry in Part 1 or Part 2 did you list the original creditor?
2747 West Clay Street A			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Saint Charles	MO State	63301 ZIP Code	Last 4 digits of account number 8 8 1 9
Convergent Outsourcing			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 9004 Number Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured  Claims
Renton	WA		
City  Since the second contract of the city of the cit	State	ZIP Code	Last 4 digits of account number 8 8 1 9
Enchance Recovery Comp	any		On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 57547			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Street			✓ Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville	FL	32241	Last 4 digits of account number 8 8 1 9
Creditors Discount & Aud	State	ZiP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
415 East Main - POB 213			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Streater	IL.	61364	Last 4 digits of account number 8 8 1 9
	State	ZIP Code	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 3097 Number Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
Bloomington	IL	61702	Claims
City	IL State	ZIP Code	Last 4 digits of account number 8 8 1 9

Case 16-27128

LittleDocument

Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Page 33 of 54

Debtor 1

Ariel В First Name Middle Name

Case number (if known)

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#### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

5 - 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				Total claim
Total claims	6a	. Domestic support obligations	6a.	\$0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$0.00
	6с.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6e.	s0.00
un na managan kanagan				
Total claims				Total claim
	6f.	Student loans	6f.	s 0.00
from Part 2		Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		s0.00
from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	6g.	\$ 0.00 \$ 0.00

#### Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 34 of 54

Debtor First Name Middle Name Last Name	
Debtor 2	
Spouse If filing) First Name Middle Name Last Name	
inited States Bankruptcy Court for the: Northern District of Illinois	

☐ Check if this is an amended filing

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company w	rìth whom you	have the contract or le	ease State what the contract or lease is for
2.1	MLG Ma	naement		n te te te te te e tradición de la grapa Daga y la esta t	Yearly Residential Lease
	Name				
		uth Drexe	l Blvd		
	Number	Street			
	Chicago		IL	60653	
income on a	City	nd å bled i knot i knot i de ble betom Earl i sella de be	State	ZIP Code	
2.2					
mortun on t	Name				
	Number	Street		<del></del>	
وغالماندو	City	on. 470mil o A. Brittle S. William V. William V.	State	ZIP Code	
2.3					
	Name		**************************************	··········	
	Number	Street			
VAR-1008 18-54.0	Cîty	***********************	State	ZIP Code	
2.4					
	Name				and the state of t
	Number	Street			
HARDON STATE	City	33.550.000.000.000.000.000.000.000.000.0	State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 35 of 54

Debtor 1	Ariel	B	Little
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filin	g) First Name	Middle Name	Last Name
Jnited States	s Bankruptcy Court for	r the: Northern District of Illin	nois

Check if this is an amended filing

#### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

Arizona, Ca	last 8 years, have you lived in a community property st alifornia, Idaho, Louisiana, Nevada, New Mexico, Puerto Rio to line 3.	co, Texas, Washington, a	unity property states and territories include nd Wisconsin.)
	to line 3.		nd wisconsin.)
	d your spouse, former spouse, or legal equivalent live with	you at the time?	
☑ No	- ,	•	
Yes.	i. In which community state or territory did you live?	Fill in the	e name and current address of that person.
Nam	ne of your spouse, former spouse, or legal equivalent		
Num	nber Street		
City	State	ZIP Code	
	1, list all of your codebtors. Do not include your spouse		
	Your codebtor	C	olumn 2: The creditor to whom you owe the d
			olumn 2: The creditor to whom you owe the dineck all schedules that apply:
Name			
		C	neck all schedules that apply:
Name Number	Street	C	heck all schedules that apply:    Schedule D, line
		C	heck all schedules that apply:    Schedule D, line   Schedule E/F, line
Number	Street	ZIP Code	heck all schedules that apply:    Schedule D, line    Schedule E/F, line    Schedule G, line
Number	Street	ZIP Code	heck all schedules that apply:  Schedule D, line  Schedule E/F, line  Schedule G, line
Number City	Street	ZIP Code	A Schedule D, line  Schedule E/F, line  Schedule G, line  Schedule D, line  Schedule D, line
Number  City  Name  Number	Street State	ZIP Code	heck all schedules that apply:  Schedule D, line  Schedule E/F, line  Schedule G, line
Number City Name	Street State	ZIP Code	A Schedule D, line  Schedule E/F, line  Schedule G, line  Schedule D, line  Schedule D, line
Number City Name Number City	Street State	ZIP Code	heck all schedules that apply:    Schedule D, line    Schedule E/F, line    Schedule G, line    Schedule D, line    Schedule E/F, line    Schedule G, line
Number  City  Name  Number	Street State	ZIP Code	Schedule D, line  Schedule E/F, line  Schedule G, line  Schedule D, line  Schedule E/F, line  Schedule G, line
Number City  Name Number City	Street State	ZIP Code	Schedule D, line  Schedule E/F, line  Schedule G, line  Schedule D, line  Schedule G, line  Schedule G, line  Schedule G, line  Schedule G, line
Number City  Name  Number City  Name	Street  State  State  Street	ZIP Code	heck all schedules that apply:    Schedule D, line    Schedule E/F, line    Schedule D, line    Schedule E/F, line    Schedule E/F, line    Schedule G, line

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 36 of 54

Fill in this information to identify	your case:					
Debtor 1 Ariel B	Little					
First Name Debtor 2	Middle Name	Last Name				
(Spouse, if filing) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	Northern District of Illinois					
Case number (If known)				Check if t	his is:	
					ended filing	
					olement showing postpetition is as of the following date:	on chapter 13
Official Form 106l	_			MM / D	DD / YYYY	
Schedule I: You	ur Income					12/15
Be as complete and accurate as p supplying correct information. If y If you are separated and your spot separate sheet to this form. On the Part 1: Describe Employn	ou are married and not filuse is not filing with you, etop of any additional pag	ing jointly, and ye do not include in	our spouse formation a	is living with y bout vour spo	ou, include information about use. If more space is needed	out your spouse. d. attach a
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing s	医神经性 医结节 经正常的证据 医电压性
If you have more than one job, attach a separate page with information about additional employers.	Employment status	<b>☑</b> Employed ☐ Not employ	yed		Employed Not employed	
Include part-time, seasonal, or self-employed work.	0	Cashier				
Occupation may include student or homemaker, if it applies.	Occupation	-		And the War War War Advantage I have the Color of the Col		
	Employer's name	Lettuce Ente	rtain You			
	Employer's address	835 North M	ichigan Av	enue		
		Number Street	<del></del>		Number Street	
		*****				
		Chicago City	IL State ZII	60640	City State	ZIP Code
	How long employed the	•			1 Year	
		1 1001	<b>ya</b>		1 1001	
Part 2: Give Details About	t Monthly Income					
Estimate monthly income as of spouse unless you are separated		n. If you have noth	ning to report	for any line, wr	ite \$0 in the space. Include yo	ur non-filing
If you or your non-filing spouse had below. If you need more space, a	ave more than one employe	er, combine the info	ormation for	all employers fo	or that person on the lines	
			Fo	or Debtor 1	For Debtor 2 or non-filing spouse	
<ol><li>List monthly gross wages, sal deductions). If not paid monthly,</li></ol>			2. \$	1,144.00	\$	
3. Estimate and list monthly over	rtime pay.		3. +\$	0.00	+ \$	
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$	1,144.00	\$	

Case 16-27128 Doc 1

Filed 08/24/16

Entered 08/24/16 09:00:59

Debtor 1

First Name

В

Document

Page 37 of 54

Case number (if known)

For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 1,144.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 96.00 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 0.00 5c. 5d. Required repayments of retirement fund loans 0.00 5d. 5e. Insurance 0.00 5e. 5f. Domestic support obligations 0.00 5f. 0.00 5g. Union dues 5g. 5h. Other deductions. Specify: __ 0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 96.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 1,048.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a. 8b. Interest and dividends 0.008c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c 0.00 8d. Unemployment compensation 8d. 8e. Social Security 8e. 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps 700.00 8f. 8g. Pension or retirement income 0.00 8g. 8h. Other monthly income. Specify: 8h. 0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 700.00 Calculate monthly income. Add line 7 + line 9. 1,748.00 0.001,748.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J Specify: Food Stamps 0.00 11. 🛨 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1.748.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. Yes. Explain:

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main

		Document	Page 38 of 54			
Fill	in this information to ic	lentify your case:				
Deb	tor 1 Ariel	B Little				
Deb	First Name tor 2	Middle Name Last Name		k if this is:		
	use, if filing) First Name	Middle Name Last Name	l l	amended	_	
Unit	ed States Bankruptcy Court	for the: Northern District of Illinois	ex	suppiemen penses as	t snowing post of the followin	tpetition chapter 13 g date:
	e number nown)		<u></u>	/ / DD / YYY		•
Off	icial Form 106	J				
Sc	hedule J:	Your Expenses				12/15
Intorr	complete and accurate nation. If more space is own). Answer every que	e as possible. If two married people are fine needed, attach another sheet to this form estion.	ing together, both are equals. On the top of any addition	ally respon onal pages,	sible for supply write your nam	ring correct ne and case number
Part	19 Describe You	r Household				
1. ls t	his a joint case?					
	No. Go to line 2. Yes. <b>Does Debtor 2 live</b>	in a separate household?				
	☑ No					
	Yes. Debtor 2 m	nust file Official Form 106J-2, Expenses for S	Separate Household of Debto	or 2.		
	you have dependents?	□ No	Dependent's relationship to		Dependent's	Does dependent live
	not list Debtor 1 and otor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	**************************************	age	with you?
Do nan	not state the dependents	,	Son		14	☐ No ☑ Yes
			Son		12	□ No
						☑ Yes
			<u>Dauaghter</u>		2 Mon	□ No ☑ Yes
			Dauaghter		8	□ No
			<u> Dauagrici</u>	V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-V-	0	☑ Yes
			**************************************			□ No
exp	our expenses include enses of people other the real results and your depende			TOTAL AND	V -10-74 1/00-74	☐ Yes
		The contract of the contract o	ه المنافظة ا	er formerly, company we have the the transfer which	ti distrib digan 1912 99 meningan saka ta ta memben 1517 membentuk disaba	я Алгран (До комформ и митом в у Авропия в ARI и Riddenniy до в угорог, пол удорования в роги и
Part 2		ngoing Monthly Expenses				
expen	ate your expenses as of ses as of a date after th able date.	your bankruptcy filing date unless you a e bankruptcy is filed. If this is a suppleme	re using this form as a sup ental <i>Schedule J</i> , check the	plement in box at the	a Chapter 13 c top of the form	ase to report and fill in the
		h non-cash government assistance if you	know the value of		restricte to be sured to	era salenda le sala le
such a	ssistance and have inc	luded it on Schedule I: Your Income (Offi	cial Form 106l.)		Your exper	ises
	e rental or home owners rent for the ground or lo	ship expenses for your residence. Include t.	first mortgage payments and	d 4.	\$	0.00
	ot included in line 4:					
4a. 	Real estate taxes			4a.	\$	0.00
4b.	Property, homeowner's			4b.	\$	0.00
4c.		pair, and upkeep expenses		4c.	\$	0.00
4d.	momeowner's associati	on or condominium dues		4d	\$	0.00

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 39 of 54

Debtor 1

Ariel В Little Last Name Case number (if known)_

			Your expen	ses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	500.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	400.00
	6d. Other. Specify: n/a	6d.	\$	0.00
7	Food and housekeeping supplies	7,	\$	700.00
8	Childcare and children's education costs	8.	\$	0.00
9	Clothing, laundry, and dry cleaning	9.	\$	120.00
10.	Personal care products and services	10.	\$	50.00
11.	Medical and dental expenses	11.	\$	0.00
12.	respectively.		¢	125.00
	Do not include car payments.	12.	\$	····
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	30.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	œ	25.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify: n/a	15d.	\$	0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: n/a	17c.	\$	0.00
	17d. Other. Specify: n/a	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from			
	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.  Specify: n/a	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		*	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	200. 20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
	the same to be and the same to be a set of the same to			

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 40 of 54

Debtor 1	Ariel B Little First Name Middle Name Last Name	Case number (if known)	
21. <b>Otl</b>	ner. Specify: n/a	21.	+\$ 0.00
22. <b>Ca</b> i	culate your monthly expenses.		
228	a. Add lines 4 through 21.	<b>22a</b> .	\$1,650.00
22b	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official F	Form 106J-2 22b.	\$0.00
220	. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$1,650.00
23. <b>Calc</b>	sulate your monthly net income.		
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$1,748.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$1,650.00
23c.	Subtract your monthly expenses from your monthly income.  The result is your monthly net income.	23c.	\$ 98.00
24. <b>Do y</b>	ou expect an increase or decrease in your expenses within the	year after you file this form?	
	example, do you expect to finish paying for your car loan within the you gage payment to increase or decrease because of a modification to t		
<b>Ø</b> N	lo.		
☐ Y	es. Explain here:		
	***************************************		

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 41 of 54

Fill in th	ais information	ı to identify yo	Ur 6366'			•			
SAMUAL MARK	the control of the control on	a partir a financia de servicio de la Escala							
Debtor 1	Ariel First Name	В	Little Middle Name	Last Name					
Debtor 2 (Spouse, i	f filing) First Name		Middle Name	Lasi Name					
		Court for the: No	rthern District of III						
Case nur					Land				
(If known)						***************************************		*****	Check if this is an amended filing
						•		·	g
Officia	al Form 1	107							
State	ement o	f Financ	ial Affair	s for Indi	viduals	Filing for	r Bankrı	ıptcy	04/16
Be as co	mplete and ac	curate as poss	ible. If two marrie	ed people are fili	ing together,	both are equally i	esponsible for	r supplying	correct
				te sheet to this f	orm. On the t	op of any addition	nal pages, writ	e your nam	and case
number (	ii known). Ans	swer every que	stion.						
Part 1:	Give Deta	ails About Yo	ur Marital Stat	us and Where	You Lived I	3efore			
1. Wha	t is your curre	nt marital statı	ıs?						
	Married								
<b>Ø</b> 1	Not married								
	-	ears, have you	lived anywhere o	other than where	you live now	<i>i</i> ?			
			14 46 116	6	.a I	40			
۱ است	res. List all of th	ne places you ii	ved in the last 3 ye	ears. Do not inclu	ide where you	live now.	on Consension Section Sec.	North North Control	
	Debtor 1:			Dates Debtor	1 Debtor 2:				Dates Debtor 2 lived there
					Same a	as Debtor 1			Same as Debtor 1
	Number St	traat		From	Numbe	r Street			From
	Number 3	treet		То		a Suleet			To
								<del></del>	
	City	St	ate ZIP Code		City		State ZIP Cod	le .	
	***************************************			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	m .	nan aanaan aanaan aanaa aa			Same as Debtor 1
					Same a	as Debtor 1			Same as Debtor 1
	Number St	treet		From	Numbe	r Street			From
				To					То
								***	
	City	St	ate ZIP Code		City		State ZIP 0	Code	
	=	0.			2,				
3. With	in the last 8 ye	ears, did you e	ver live with a sp	ouse or legal eq	uivalent in a	community prope xico, Puerto Rico,	rty state or ter	ritory? (Con	nmunity property
Siale		a moluue Anzor	ia, Gaillofflia, Idali	o, coulsialia, iNE\	rada, New Me	AIGO, I UGILO MICO,	· OAGO, YVGOIMIQ	gwii, and PVI	
		you fill out Sch	edule H: Your Cod	lebtors (Official F	orm 106H).				
	· · · · · · · · · · · · · · · · · · ·	and the second second second							

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 42 of 54

		ttle I Name	Case nu	imber (if known)	
Fill in If yo	• •	ed from all jobs and all bus	inesses, including part-tir	me activities,	dar years?
U \	Yes. Fill in the details.				
		Debtor 1	ja elektristik kantan kant Kantan kantan kanta	Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	<ul><li>Wages, commissions, bonuses, tips</li><li>Operating a business</li></ul>	\$	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
	For last calendar year:	✓ Wages, commissions, bonuses, tips	\$ 22,060.00	Wages, commissions, bonuses, tips	\$
٠.	(January 1 to December 31,2014 YYYY  For the calendar year before that:	<ul> <li>Operating a business</li> <li>Wages, commissions,</li> </ul>		☐ Wages, commissions,	
	(January 1 to December 31, 2015	bonuses, tips  Operating a business	\$ 20,000.00	bonuses, tips  Operating a business	\$
	each source and the gross income from No Yes. Fill in the details.	each source separately. D	o not include income that	t you listed in line 4.	
·	CS. Firm the details.	Debtor 1		Debtor 2	
		According to the control of the cont		DEDIOI 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:		each source (before deductions and	Sources of income Describe below.	each source (before deductions and exclusions)
		Describe below.	each source (before deductions and exclusions)	Sources of income Describe below.	each source (before deductions and exclusions)
	the date you filed for bankruptcy:	Describe below.	s 700.00	Sources of income Describe below.	each source (before deductions and exclusions)
		Describe below.	s 700.00	Sources of income Describe below.	each source (before deductions and exclusions)
	the date you filed for bankruptcy:  For last calendar year:	Describe below.	sssssssss	Sources of income Describe below.	each source (before deductions and exclusions)

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 43 of 54

Debtor 1

		Doddinon	it ago to or or
Ariel	В	Little	Case number (# known)
First Name	Middle Name	Last Name	

Part 3.	lict	Cortain	Daymanta	V	33-4

art 3:	List Certain Payments You	ı Made Before	e You Filed for Bankı	uptcy		
Are eith	er Debtor 1's or Debtor 2's del	ots primarily co	nsumer debts?			
☑ No.	Neither Debtor 1 nor Debtor 2 "incurred by an individual prima	rily for a persona	al, family, or household po	ırpose."		I(8) as
	During the 90 days before you t	filed for bankrupt	tcy, did you pay any credi	tor a total of \$6,425* or r	more?	
	No. Go to line 7.					
	Yes. List below each creditored total amount you paid to child support and alimo	that creditor. Do	paid a total of \$6,425* or r not include payments for include payments to an a	domestic support obliga	tions, such as	
	* Subject to adjustment on 4/01				•	
Yes.	. Debtor 1 or Debtor 2 or both I	ave nrimarily c	oneilmar dahte			
	During the 90 days before you f			or a total of \$600 or mor	e?	
	☑ No. Go to line 7.		2, y = 2 pay 2y 510dii		<del>-</del> -	
	Yes, List below each creditor creditor. Do not include alimony. Also, do not in	e payments for de	aid a total of \$600 or mor omestic support obligatio s to an attorney for this ba	ns, such as child suppor	ou paid that t and	
			Dates of Total amo	unt paid Amount	you still owe	Was this payment for
			\$	0.00 \$	0.00	☐ Mortgage
	Creditor's Name					Car
	Number Street					Credit card
	Hamber Offeet					Loan repayment
	***************************************					Suppliers or vendors
	City State	ZIP Code				Other
	Only State	Zir Code				
			\$	0.00 \$	0.00	
	Creditor's Name		<u> </u>	<u> </u>	0.00	☐ Mortgage
						Car
	Number Street					Credit card
						Loan repayment
						Suppliers or vendors
	City State	ZIP Code				Other
	2007.00					
			_	0.00	0.00	
	Creditor's Name		\$	<u>0.00</u> \$	0.00	☐ Mortgage
						☐ Car
	Number Street					Credit card
						Loan repayment
						· ·
						Suppliers or vendors

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 44 of 54 Ariel В Little Debtor 1 Case number (if known) Last Name 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Ø No Yes. List all payments to an insider. Dates of Total amount Amount you still Reason for this payment payment paid owe 0.00 0.00 Insider's Name Number Street City State ZIP Code 0.00 \$ 0.00 Insider's Name Number Street 8. Wit an Incl V

City	State	ZIP Code						
nin 1 year before yo	ou filed for bank	ruptcy, did vo	u make anv i	payments	or transfe	er anv prope	ertv on	account of a debt that benefited
insider?			,				,	
ude payments on de	bts guaranteed o	or cosigned by	an insider.					
No								
Yes. List all payment	ts that benefited	an insider.						
			Dates of payment		mount	Amount you owe	still l	Reason for this payment Include creditor's name
					0.00	Λ	.00	
Insider's Name				\$		\$		
Number Street		***************************************					THE PASSAGE AND A STREET	
<del></del>			4 <del>-74-74-74-74-74-74-74-74-74-74-74-74-74-</del>					
City	State	ZIP Code					A	
				\$	0.00	\$0.	.00	
Insider's Name								
Number Street								
City	State	ZIP Code						T

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 45 of 54

Debtor	1

			_	 3		
Debtor 1	Ariel	В	Little			
ACOID!					Case number (if known)	
	First Name	Middle Name	Last Name		odse namber (il known)	

No			
Yes. Fill in the details.	Nature of the case	Court or agency	Status of the c
Case title		Court Name	Pending On appeal
Case number		Number Street	Concluded
Case title		City State ZIP Code  Court Name	— Pending
Case number		Number Street  City State ZIP Code	On appeal Concluded

	Describe the property Date		he property
Creditor's Name		\$	0.00
Number Street	Explain what happened		
	Property was repossessed.		
	Property was foreclosed.		
	Property was garnished.		
City State ZIP Code	Property was attached, seized, or levied.		
	Describe the property Date	Value of	the property
		\$	0.00
Creditor's Name		Ψ	
Number Street			
Number Sheet	Explain what happened		
	Property was repossessed.		
	Property was foreclosed.		
City State ZIP Code	Property was garnished.		
June air obus	Property was attached, seized, or levied.		

Page 46 of 54 Document Ariel В Debtor 1 Little First Name Case number (if known) Middle Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ✓ No Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name 0.00 Number Street City State ZIP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person the gifts 0.00 Person to Whom You Gave the Gift 0.00 Number Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you

Case 16-27128

Doc 1

Filed 08/24/16

Entered 08/24/16 09:00:59

Desc Main

1	Ariel	В		Little	Docu		i age 4	of 54					
	First Name	Middle Nam	ė	Last Name	:			Case numi	ber (if known)				
thin	ı 2 years bel	fore you file	d for bank	ruptcy,	did you	give any g	jifts or contril	outions with a	a total val	ue of mo	re than §	\$600 to a	inv charity?
No												,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	my onlanty.
l Ye	s. Fill in the	details for ea		ontribut	tion.								
G th	ifts or contrib nat total more	outions to ch	arities	Dı	escribe wh	at you con	tributed			Date yo		Valu	
Cha	arity's Name	***************************************								of management and a second	<del></del>	\$	0.0
										Market and Applications		\$	0.0
Num	nber Street									ri příděn stronomonto			
										Annual memory of the party of t			
City	State	ZIP Code								Samout 1			
No	, o. gamba	····9 :	for bankru	ptcy or	since yo	u filed for	· bankruptcy,	did you lose a	anything	because	of theft,	fire, oth	er
No Yes De:	1 year beforer, or gamble.  Fill in the describe the prowuthe loss oc	etails.	al Azonatoka tek	De	scribe any	Athurace Insurance	Edding and Autorio	e loss		Date of y		Value	er of property
No Yes De:	Fill in the d	etails.	al Azonatoka tek	<b>De</b>	scribe any	insurance	ES ASSASSAS STATE	e loss					
No Yes De:	Fill in the d	etails.	al Azonatoka tek	<b>De</b>	scribe any	insurance	Coverage for the	e loss		Date of y		Value	
No Yes De:	Fill in the d	etails.	al Azonatoka tek	<b>De</b>	scribe any	insurance	Coverage for the	e loss		Date of		Value lost	of property
No Yes Der hou	Fill in the d scribe the pro w the loss oc	etails.  pperty you los curred	st and	De Incida	scribe any lude the an ims on line	insurance nount that in 33 of Sched	coverage for thisurance has paidule A/B: Proper	e loss d. List pending ii y	<b>ASUrance</b>	Date of y loss	<b>/OUT</b>	Value lost \$	of property  0.00
No Yes Der hon in 1 con de a	scribe the prowing the loss oc	etails.  perty you los curred  in Paymen e you filed f it seeking b s, bankruptc	ets or Trai	nsfers	scribe any lude the an ims on line d you or a	nount that in 33 of Sched	coverage for the surance has paidule A/B: Proper	e loss d. List pending in y.	nsurance	Date of y loss	our	Value lost \$	of property  0.00
No Yes Dei hou in 1 con ide a vo 'es.	List Certail  I year before any attorneys  Fill in the defronica Eas	etails.  perty you los curred  in Paymente you filed fout seeking best, bankruptoetails.	ets or Trai	nsfers otcy, di	d you or paring a l	anyone elsoankrupto	coverage for the surance has paidule A/B: Proper	e loss d. List pending in y.  /our behalf pa	nsurance	Date of y loss sfer any p ur bankruj Date payr	property	Value lost \$	of property  0.00
No Yes Dec hon in 1 con ide a Vo 'es.	List Certain sulted about any attorneys Fill in the defonica Eas on Who Was Pa	etails.  Experty you lose curred  In Paymente you filed fout seeking best, bankrupto	ets or Trai	nsfers otcy, die or preparers	d you or paring a laction are	insurance nount that in 33 of Scheo anyone elsoankrupto t counselin	coverage for the surance has paidule A/B: Proper see acting on you petition?	e loss d. List pending in y.  Your behalf parentices requested.	nsurance ay or trans	Date of y loss sfer any p	property	Value lost \$	of property  0.00
No Yes Der hou in 1 con de a Vo Yes.	List Certail  I year before any attorneys  Fill in the defronica Eas	etails.  Experty you lose curred  In Paymente you filed fout seeking best, bankrupto	ets or Trai	nsfers otcy, die or preparers	d you or paring a laction are	insurance nount that in 33 of Scheo anyone elsoankrupto t counselin	coverage for the surance has particular and the surance has pa	e loss d. List pending in y.  Your behalf parentices requested.	ay or transitired in you	Date of y loss sfer any p ur bankrup Date pays transfer y	property ptcy.	Value lost \$	of property  0.00
No Yes Der hou in 1 con ide a Vo 'es.	List Certain the describe the product of the produc	etails.  Experty you lose curred  In Paymente you filed fout seeking best, bankrupto	ets or Trai	nsfers otcy, die or preparers	d you or paring a laction are	insurance nount that in 33 of Scheo anyone elsoankrupto t counselin	coverage for the surance has particular and the surance has pa	e loss d. List pending in y.  Your behalf parentices requested.	ay or transitired in you	Date of y loss sfer any p ur bankruj Date payr transfer y made	property ptcy.	Value lost \$	O.O(
No Yes hou hou de a Ver Perso 921 Numi	List Certain I year before any attorneys on Who Was Paid Street	etails.  Experty you lose curred  In Paymente you filed fut seeking best, bankrupton to be tails.  Estails.  Estails.  Estails.  Estails.  Estails.  Estails.  Estails.  Estails.  Estails.	ots or Training of bankruptcy bankruptcy betition position position of the second of t	nsfers otcy, die or preparers	d you or paring a laction are	insurance nount that in 33 of Scheo anyone elsoankrupto t counselin	coverage for the surance has particular and the surance has pa	e loss d. List pending in y.  Your behalf parentices requested.	ay or transitired in you	Date of y loss sfer any p ur bankruj Date payr transfer y made	property ptcy.	Value lost \$ to anyo Amoun	0.00

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Page 48 of 54 Document Ariel В Little Debtor 1 Case number (if known)_ First Name Middle Name Last Name Description and value of any property transferred Date payment or Amount of transfer was made payment 001Debtorcc Credit Counseling Certification Person Who Was Paid 372 Summit 08/19/2016 14.95 Number Street 0.00 Jersey City NJ 03706 ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☑ No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was made Person Who Was Paid 0.00 Number Street 0.00 City State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **I** No Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street City ZIP Code Person's relationship to you Person Who Received Transfer Number Street

State

Person's relationship to you

ZIP Code

Document Page 49 of 54 Ariel В Little Debtor 1 Case number (if known) First Name Middle Nar Last Name 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) **2** No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. ☑ No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Name of Financial Institution XXXX-____ Checking 0.00 ☐ Savings Number Street ☐ Money market ☐ Brokerage City State ZIP Code Other ☐ Checking XXXX-0.00 Name of Financial Institution Savings Number Street Money market ☐ Brokerage Other_ State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ☑ No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? ☐ No Name of Financial Institution ☐ Yes Name Number Street Number Street City State ZIP Code City ZIP Code

Case 16-27128

Doc 1

Filed 08/24/16

Entered 08/24/16 09:00:59

Desc Main

Ariel В Debtor 1 Little Case number (if known First Name Last Name 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ☑ No Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? No. Name of Storage Facility Name ☐ Yes Number Street Number Street City State ZIP Code City State ZIP Code Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. ☐ No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name 0.00 Number Street Number Street City ZIP Code ZIP Code State Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ No Yes. Fill in the details. Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code City State ZIP Code

Entered 08/24/16 09:00:59

Page 50 of 54

Desc Main

Case 16-27128

Doc 1

Filed 08/24/16

Document

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Document Page 51 of 54 Ariel В Debtor 1 Little Case number (if known) First Name Mirtdle Name 25. Have you notified any governmental unit of any release of hazardous material? **☑** No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code City State ZIP Code 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. ☐ Yes. Fill in the details. Court or agency Nature of the case Status of the case Case title Court Name Pending On appeal Number Street Concluded Case number City State ZIP Code Give Details About Your Business or Connections to Any Business Part 11: 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation ☑ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Business Name Do not include Social Security number or ITIN. Name of accountant or bookkeeper Dates business existed ____То ZIP Code State Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. **Business Name** Number Street Name of accountant or bookkeeper Dates business existed

City

ZIP Code

From _____ To ____

Case 16-27128 Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main Page 52 of 54 Document Ariel В Little Debtor 1 Case number (if known) First Name Middle Name Last Name Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. **Business Name** Number Street Name of accountant or bookkeeper Dates business existed From _____ To ____ City State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City State ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Date __ Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☑ No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ No

Yes. Name of person_

Veronica Eason

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inf	ormation	to identif	y your case:		
	Ariel	В	Little		
	First Name		Middle Name	Last Name	
Debtor 2					
(Spouse, if filing)	First Name		Middle Name	Last Name	
United States B	Sankruptcy	Court for the	: Northern District of Illinoi	S	
				•	لسا
Case number (If known)				_	
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## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

## Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: C information below.	Creditors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	☐ Surrender the property.	<b>☑</b> No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	₩ No
Description of	Retain the property and redeem it.	☐ Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	<b>☑</b> No
Description of	Retain the property and redeem it.	☐ Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	₩ No
and the second s	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

Case 16-27128

Doc 1 Filed 08/24/16 Entered 08/24/16 09:00:59 Desc Main

Debtor 1

В

Middle Name

Little Document

Page 54 of 54

Case number (If known)_

Part 2: **List Your Unexpired Personal Property Leases** 

Description of leased property:  Lessor's name: MLG Management  Description of leased Yearly Residential Lease property:  Lessor's name:  Description of leased property:	Will the lease be assumed?  □ No □ Yes  □ No □ Yes  □ No □ Yes  □ No □ Yes
Description of leased property:  Lessor's name:	✓ Yes  ✓ No  ☐ Yes  ✓ No  ☐ Yes
Description of leased property:  Lessor's name:	✓ No ☐ Yes  ✓ No ☐ Yes
Description of leased property:  Lessor's name:  Description of leased property:	✓ No ☐ Yes  ✓ No ☐ Yes
Description of leased property:  Lessor's name:  Description of leased property:  Description of leased property:  Description of leased property:	☐ Yes  ☑ No ☐ Yes
property:  Lessor's name:  Description of leased property:  Description of leased property:  Description of leased property:	✓ No  Yes
Description of leased property:  Lessor's name:  Description of leased property:  Lessor's name:  Description of leased property:  Lessor's name:  Description of leased property:  Description of leased property:	☐ Yes
Description of leased property:	<b>☑</b> No
Description of leased property:  Lessor's name:  Description of leased property:  Lessor's name:  Description of leased property:  Description of leased	
Description of leased essor's name:  Description of leased essor's name:  Description of leased	Yes
Description of leased property:  Description of leased  Description of leased	
essor's name: Description of leased	<b>Ľ</b> No
Description of leased	Yes
•	<b>☑</b> No
	Yes
nder penalty of perjury, I declare that I have indicated my intention about any property of my estate that ersonal property that is subject to an unexpired lease.	
gnature of Debtor 1 Signature of Debtor 2	